COMMUNITY BENEFITS REPORTING FORM

Pursuant to RSA 7:32-c-l

FOR FISCAL YEAR BEGINNING 05/01/2015

fy2016

to be filed with:
Office of the Attorney General
Charitable Trusts Unit
33 Capitol Street, Concord, NH 03301-6397
603-271-3591

Section 1: ORGANIZATIONAL INFORMATION

Organization Name Hunt Community

Street Address 10 Allds Street

City Nashua

County 06 - Hillsborough State NH Zip Code 3060

Federal ID # 20369906

State Registration # 1250

Website Address: www.huntcommunity.org

Is the organization's community benefit plan on the organization's website? No

Has the organization filed its Community Benefits Plan Initial Filing Information form? Yes

IF NO, please complete and attach the Initial Filing Information Form.

IF YES, has any of the initial filing information changed since the date of submission? Yes IF YES, please attach the updated information.

Chief Executive:

Peter Warecki

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Board Chair:

Scott Cote

603577090

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Community Benefits

Plan Contact:

Peter Warecki

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Is this report being filed on behalf of more than one health care charitable trust? No

IF YES, please complete a copy of this page for each individual organization included in this filing.

Section 2: MISSION & COMMUNITY SERVED

Mission Statement: "Hunt Community serves persons aged 62 and older with a continuum of care that respects their individuality and provides support appropriate to their needs." The Mission Statement was reaffirmed on June 22, 2016.

Has the Mission Statement been reaffirmed in the past year (RSA 7:32e-I)? Yes

Please describe the community served by the health care charitable trust. "Community" may be defined as a geographic service area and/or a population segment.

Service Area (Identify Towns or Region describing the trust's primary service area): Please see below.

Service Population (Describe demographic or other characteristics if the trust primarily serves a population other than the general population):

Hunt Community's definition of the community and population served are its residents. The Hunt Community tradition over the past century was to and continues to be to provide financially for its residents when they have depleted their resources.

Over the past 121 years, thousands of residents have been supported financially. The financial support is due in part to a small bequest left from the Hunt family and the fiscally responsible Boards over the past century. There is no fundraising done by Hunt Community.

This facility has never participated in the Medicare or Medicaid program, nor has it received monies from any other governmental agencies.

The provision of care and social services to a significant number of elderly, which diminishes the demand on government services, is a less measurable but an equally important benefit to the State and the community.

Section 3: COMMUNITY NEEDS ASSESSMENT

In what year was the last community needs assessment conducted to assist in determining the activities to be included in the community benefit plan?

2009 (Please attach a copy of the needs assessment if completed in the past year)

Was the assessment conducted in conjunction with other health care charitable trusts in your community? No

Based on the needs assessment and community engagement process, what are the priority needs and health concerns of your community?

	NEED (Please enter code # from attached list of community needs)
1	501
2	603
3	372
4	
5	
6	
7	
8	
9	

What other important health care needs or community characteristics were considered in the development of the current community benefits plan (e.g. essential needs or services not specifically identified in the community needs assessment)?

	NEED (Please enter code # from attached list of community needs)
Α	
В	
С	
D	
Е	
F	
G	

Please provide additional description or comments on community needs including description of "other" needs (code 999) if applicable. Attach additional pages if necessary:
Hunt Community promotes and participates in a number of community-based programs which are further described in Section 4:B. Hunt Community also opens up meeting spaces at no cost to the community and allows outside groups to utilize the facilities. Groups that currently utilize our meeting spaces on a regular basis include the Rise Group, and "Course in Miracles" which our residents can attend if they wish to do so.

Methodology:

Community input is solicited annually from Board Members, staff, residents of Hunt Community, and residents' families. Periodically, an outside firm is hired to prepare a Resident Satisfaction Survey. The firm compares the results to a benchmark group of approximately 70 continuing care retirement communities around the country. We have found that Hunt Community has a very high approval rating surpassing the benchmark group on all questions.

Satisfaction Surveyy Results:

Hunt Community was complimented on its polite and courteous staff in all departments. Dining Services was praised for its variety of meals and the quality of food. The Volunteer and Activities Departments were thanked for keeping residents busy with a variety of activities and entertainment both in the facility, and with outside trips. Housekeeping and Maintenance received many accolades for cleanliness and grounds-keeping. The residents feel safe and secure in our community. There were several comments on the friendliness of everyone at Hunt Community and the family-like atmosphere that exists here.

Priorities:

Our priority at Hunt Community has been our residents, and the financial subsidy of our residents. Every year the Community allocates a portion of income from the endowment fund to direct and indirect subsidies.

We ended the fiscal year with several residents receiving a subsidy, and the total dollars expended from the portfolio income was \$321,000. In addition, Hunt Community paid \$280,562. in property taxes to the City of Nashua this past year. Over the past years, more than \$601,562. has been expended in subsidies.

In addition to not participating in the Medicare and Medicaid program, Hunt Community has not done any fundraising in its history.

Section 4: COMMUNITY BENEFIT ACTIVITIES

Identify the categories of Community Benefit activities provided in the preceding year and planned for the upcoming year (note: some categories may be blank). For each area where your organization has activities, report the past and/or projected unreimbursed costs for *all* community benefit activities in that category. For each category, also indicate the *primary* community needs that are addressed by these activities by referring to the applicable number or letter from the lists on the previous page (i.e. the listed needs may relate to only a subset of the total reported costs in some categories).

A. Community Health Services		Community Need Addressed		Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)
Community Health Education	5		1 .	\$1,000.00	
Community-based Clinical Services					
Health Care Support Services					
Other:					

B. Health Professions Education	Community Need Addressed	Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)
Provision of Clinical Settings for Undergraduate Training	5 7		
Intern/Residency Education			
Scholarships/Funding for Health Professions Ed.	·	\$68,000.00	
Other:		-	

C. Subsidized Health Services	<u> </u>	nmu Need Idres	-	Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)
Type of Service:	6		3	\$321,000.00	\$780,000.00
Type of Service:					-
Type of Service:			**		
Type of Service:					
Type of Service:					

D. Research	Community Need Addressed	Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)
Clinical Research			
Community Health Research			
Other:			

E. Financial Contributions Cash Donations		nmu Need Idres		Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)
		2	6	\$2,000.00	
Grants					
In-Kind Assistance	9	9	9		
Resource Development Assistance					

F. Community Building Activities	Community Need Addressed	Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)
Physical Infrastructure Improvement			·
Economic Development			·
Support Systems Enhancement			
Environmental Improvements			
Leadership Development; Training for Community Members	' 		
Coalition Building			
Community Health Advocacy			

G. Community Benefit Operations	Community Need Addressed	Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)
Dedicated Staff Costs			
Community Needs/Asset Assessment			
Other Operations			

H. Charity Care	Community Need Addressed	Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)
Free & Discounted Health Care Services	5 1	\$321,000.00	\$800,000.00

I. Government-Sponsored Health Care	Community Need Addressed	Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)
Medicare Costs exceeding reimbursement		\$0.00	
Medicaid Costs exceeding reimbursement		\$0.00	
Other Publicly-funded health care costs exceeding reimbursement		\$0.00	

Section 4 Community Benefit Activities:

<u>2015-2016 NEW PROGRAMS</u>

<u>PARTNERSHIPS WITH COLLEGES: Health Profession Education (#507 – Educational Attainment)</u>

<u>Rivier University</u>— "Adopt-A-Grandparent Program" Different clubs within the college organize groups of students to encourage community volunteering and they encourage a "Day of Volunteer Service" once in the school year. They have added a mandatory "Freshman Day of Service" for students to get acquainted with local non-profit agencies in Nashua .The Student Ministry Group and Resident Life Club also encourage students to volunteer even if it is not part of the service learning commitment focusing on a special holidays or events.

We continue our partnership/relationship with Rivier University's Department of Social and Behavioral Sciences accepting Student Interns to complete their service learning hours within our Health Care Pavilion or elsewhere as needed. We had 17 students complete 20 volunteer hours for their Adult Mental Health Course required for their Psychology Major. We had 11 nursing major students assist in our health care area. Two students chose to return for the internship.

Students were offered the opportunity to meet with the Director of Nursing and the Resident Service Director, depending on their area of study. They participated in one on one visits as well as group activities. Many were instrumental in assisting residents with transitions from independent to assisted living.

<u>Granite State College</u> – A partnership has been secured with Granite State Colleges' Osher Lifelong Learning Institute whereby Silverstone Living will serve as satellite campuses.

<u>St Joseph's School of Nursing</u> – RN students spend time job shadowing with our Director of Nursing to observe management role.

Nashua Community College - No students this year.

UNH/Nashua and Manchester Campus - One student this year.

Hesser College – No students this year

Southern NH University - No students this year

<u>UMASS Lowell Campus</u> – No students this year.

<u>Daniel Webster College</u> – No students this year.

<u>MIDDLE/JUNIOR/SENIOR HIGH SCHOOLS: (#507 –Educational Attainment)</u>

Campbell HS(Litchfield), Nashua HS North and South, Bishop Guertin HS(Nashua), Alvirne HS(Hudson) Souhegan HS(Bedford NH), Pelham HS, Nashua Christian Academy(Nashua), Nashua Catholic JH and HS, Tyngsboro HS, Londonderry HS, Elm Street Middle School(Nashua), Fairgrounds Middle School(Nashua), Pennichuk Middle School(Nashua), Presentation of Mary(Hudson), Academy of Notre Dame(Tyngsboro) all provide information to their students through guidance or volunteer fairs to encourage volunteering.

<u>Bishop Guertin</u> – 5 students volunteered this year. Also, the BG Spanish National Honor Society performed a Spanish/English Christmas Concert.

<u>Hollis/Brookline High School</u> – 3 students volunteered this year.

Hollis/Brookline Middle School sponsors the Early Act Program that brings approximately 10 students per month to volunteer in an intergenerational activity.

We continue this program Student Nursing Assistant Intern from the <u>Nashua High School-North & South</u> Health and Occupational Program this year. The Student Interns spend a complete semester volunteering within our Health Care Center shadowing and observing an assigned LNA. A huge success and we hope to continue this program every year. This often leads to employment after graduation.

<u>Alvirne High School</u> also has program similar to the Nashua High North and South's Health and Occupational Health Department. We just completed our sixth year with this program. They also rotate their schedule. This also often leads to employment after graduation for our LNA staff.

Hunt Community continues our partnership with the <u>Nashua High School North</u> <u>Transition/Job Development Program</u>. Three students with the assistance of their job coach volunteered weekly during the morning hours performing various volunteer tasks that might lead to employment opportunities. This group of students loved our program so much they made an exception to stay for semesters, fall and spring.

<u>Elm Street Middle School</u> sponsors Club Phenomenon, a rotation of 8 groups of 12 students that volunteer to earn a school trip. This year the students participated in four weeks of car washes and four weeks of "Cookies for a Cause" that joins residents with students to donate decorated cookies to the Nashua Soup Kitchen.

This year we delivered approximately 600 decorated and packaged cookies to the Soup Kitchen.

ELEMENTARY SCHOOLS: (#999 – Other)

Our residents continue to visit <u>Sunset Heights Elementary School</u> twice a month reading books and sharing stories to grades. Presently we have 6 residents who have committed whole heartedly to this program. The residents are always invited to their special events, plays and volunteer recognition parties. This seems to be a treat for our residents to mingle with the parents too.

For the past four years a group of 3rd grade students make Thanksgiving and Christmas placemats for all of our health care residents to be used at their main dinner. It certainly generates a lot of personal discussion amongst the residents and brings up many happy memories of our school days.

CHURCHES: (#999 – Other)

First Church, Granite State Church of Christ(youth group this year had a Christmas caroling event throughout our community), Grace Fellowship, Immaculate Conception, Nashua Baptist, Temple Beth Abraham(shared Jewish/Hanukah traditions)and Merrimack Valley Baptist often visit our residents as a group and individually within our Health Care Center and also assist our independent residents with special requests. Sing-a-longs, trivia sessions, game nights, craft activities, Christmas caroling, garden helpers, car washes, cleaning closets and cabinets to name a few. Some of the above churches provide our volunteer opportunities to their confirmation students. The students usually continue their volunteer time after the commitment of 15 hours is completed for confirmation.

<u>St Christopher's Parish</u> (Catholic) continues to provide catholic services and communion to all of our residents every Tuesday for our independent residents and also provide a Catholic service in our health care area on the second Tuesday of every month, as well as communion.

<u>First Church</u> continues to provide a DVD of their weekly Church Service that we have added to the Health Care Center's Activity schedule on Sunday morning. It has been very well attended because so many of our residents use to be active members of First Church in Nashua.

Merrimack Valley Baptist Church-This church continues to recruit church members to become social companions on a weekly basis. We now have 5 friendly visitors that assist residents one to one. Church members also provide a church service on the first Thursday of every month in our Health Care center. This has been very well attended and is growing. It is offered as a protestant

service but all are welcome. This spring a group of members started providing a church service on the third Sunday of every month for our ILU residents. This is a full service of music, singing hymns and sermon as well. One family brings three children (they have 6 or 7) who play the violin, piano and guitar during the service. Their 14 year old is an extremely talented pianist who has been featured on NH Chronicle and had composed and recorded about 30 of his own. We are thankful they are here.

<u>Church of The Good Shepard-</u> This church continues to provide a once a month Episcopal Church service for all of our residents. This also is very well attended church service (about 10-12 residents). They also will visit residents in our health care pavilion.

CORPORATE/BUSINESS PARTNERSHIPS – (#999 – Other)

United Way Day of Caring Program in which volunteers from numerous corporations, schools and churches participate not only assisting in our health care center performing manicures, cleaning closets and various projects but will assist our independent residents with the "larger" household tasks that become more difficult to handle alone. The United Way Day of Caring coordinates two events per year for volunteers.

OTHER ASSOCIATIONS - (#999 - Other)

<u>Operation Care for Troops</u> founded in 2004, provides packages to troops deployed overseas and veterans recovering in rehab facilities here at home. Our residents participated in two of their shipments this past year. We assembled care packages and rolling socks for these shipments. Our ILU residents as well as our health care residents really enjoy this volunteer effort as we bring the project here for them to help.

We Honor Veterans is an organization that honors veterans through the combined efforts of Home Health & Hospice with the VA. Hunt Community has partnered with this organization for special events, guest speakers, and one on one visits.

<u>Nashua Soup Kitchen</u> – receives monthly donations from an appeal in our newsletter for selected items. The item of the month is taken from the Nashua Soup Kitchen on-line wish list.

<u>Girl Scouts</u> – The Girl Scouts and Brownie local troops performed holiday caroling to fulfill their volunteer requirements for badges.

<u>Easter Seals</u> – has begun a job skills development partnership with Hunt Community. One individual comes each week to learn new clerical skills through volunteer assignments.

<u>Alzheimer's Association</u> – residents have participated in monthly fund raisers to support the Walk to End Alzheimer's.

<u>Adult Learning Center</u> – Hunt Community has partnered with ALC to provide tutoring to adult students. Retired teacher residents tutor adults at Hunt Community. This has been an extremely successful project that is likely to grow in the future.

<u>Harbor Homes</u> – Hunt Community has partnered with Harbor Homes to assist veterans in fulfilling volunteer requirements for housing and also for job skills development.

<u>Leukemia and Lymphoma Society</u> – residents assemble hundreds of lanterns for the *Light the Night* events.

Section 5: SUMMARY FINANCIAL MEASURES

Financial Information for Most Recent Fiscal Year	Dollar Amount	
Gross Receipts from Operations	\$9,091,292.00	
Net Revenue from Patient Services	\$6,744,073.00	
Total Operating Expenses	\$9,745,211.00	
Net Medicare Revenue	\$0.00	
Medicare Costs	\$0.00	
Net Medicaid Revenue	\$0.00	
Medicaid Costs	\$0.00	
Unreimbursed Charity Care Expenses	\$321,000.00	
Unreimbursed Expenses of Other Community Benefits	\$280,562.00	
Total Unreimbursed Community Benefit Expenses	\$583,151.00	
Leveraged Revenue for Community Benefit Activities		
Total Community Benefits including Leveraged Revenue for Community Benefit Activities		

Section 6: COMMUNITY ENGAGEMENT in the Community Benefits Process

List the Community Organizations, Local Government Officials and other Representatives of the Public consulted in the community benefits planning process. Indicate the role of each in the process.			Prioritization of Need	Development of the Plan	Commented on Proposed Plan
1) (Please see re	esponse in Section "3")				
2)					
3)					
4)					
5)					
6)					
7)					
8)					
9)					
10)					
11)					
12)					
13)					
14)					
15)					
16)					
17)					
18)					
19)					
20)					
21)					
- 22)					
23)			<u>.</u>		
24)					
25)					

Please provide a description of the methods used to solicit community input on community needs (attach additional pages if necessary):

Section 7: CHARITY CARE COMPLIANCE

Please characterize the charity care policies and procedures of your organization according to the following:	YES	NO	Not Applicable
The valuation of charity does not include any bad debt, receivables or revenue	\boxtimes		
Written charity care policy available to the public	\boxtimes		
Any individual can apply for charity care	\boxtimes		
Any applicant will receive a prompt decision on eligibility and amount of charity care offered			
Notices of policy in lobbies		\boxtimes	
Notice of policy in waiting rooms		\boxtimes	
Notice of policy in other public areas		\boxtimes	
Notice given to recipients who are served in their home		\boxtimes	

List of Potential Community Needs for Use on Section 3

- 100 Access to Care: General
- 101 Access to Care; Financial Barriers
- 102 Access to Care; Geographic Barriers
- 103 Access to Care; Language/Cultural Barriers to Care
- 120 Availability of Primary Care
- 121 Availability of Dental/Oral Health Care
- 122 Availability of Behavioral Health Care
- 123 Availability of Other Medical Specialties
- 124 Availability of Home Health Care
- 125 Availability of Long Term Care or Assisted Living
- 126 Availability of Physical/Occupational Therapy
- 127 Availability of Other Health Professionals/Services
- 128 Availability of Prescription Medications
- 200 Maternal & Child Health; General
- 201 Perinatal Care Access
- 202 Infant Mortality
- 203 Teen Pregnancy
- 204 Access/Availability of Family Planning Services
- 206 Infant & Child Nutrition
- 220 School Health Services
- 300 Chronic Disease Prevention and Care; General
- 301 Breast Cancer
- 302 Cervical Cancer
- 303 Colorectal Cancer
- 304 Lung Cancer
- 305 Prostate Cancer
- 319 Other Cancer
- 320 Hypertension/HBP
- 321 Coronary Heart Disease
- 322 Cerebrovascular Disease/Stroke
- 330 Diabetes
- 340 Asthma
- 341 Chronic Obstructive Pulmonary Disease
- 350 Access/Availability of Chronic Disease Screening Services
- 360 Infectious Disease Prevention and Care; General
- 361 Immunization Rates
- 362 STDs/HIV
- 363 Influenza/Pneumonia
- 364 Food borne disease
- 365 Vector borne disease

- 370 Mental Health/Psychiatric Disorders Prevention and Care; General
- 371 Suicide Prevention
- 372 Child and adolescent mental health
- 372 Alzheimer's/Dementia
- 373 Depression
- 374 Serious Mental Illness
- 400 Substance Use; Lifestyle Issues
- 401 Youth Alcohol Use
- 402 Adult Alcohol Use
- 403 Youth Drug Use
- 404 Adult Drug Use
- 405 Youth Tobacco Use
- 406 Adult Tobacco Use
- 407 Access/Availability of Alcohol/Drug Treatment
- 420 Obesity
- 421 Physical Activity
- 422 Nutrition Education
- 430 Family/Parent Support Services
- 500 Socioeconomic Issues; General
- 501 Aging Population
- 502 Immigrants/Refugees
- 503 Poverty
- 504 Unemployment
- 505 Homelessness
- 506 Economic Development
- 507 Educational Attainment
- 508 High School Completion
- 509 Housing Adequacy
- 520 Community Safety & Injury; General
- 521 Availability of Emergency Medical Services
- 522 Local Emergency Readiness & Response
- 523 Motor Vehicle-related Injury/Mortality
- 524 Driving Under Influence
- 525 Vandalism/Crime
- 526 Domestic Abuse
- 527 Child Abuse/Neglect
- 528 Lead Poisoning
- 529 Work-related injury
- 530 Fall Injuries
- 531 Brain Injury
- 532 Other Unintentional Injury

- 533 Air Quality
- 534 Water Quality
- 600 Community Supports; General
- 601 Transportation Services
- 602 Information & Referral Services
- 603 Senior Services
- 604 Prescription Assistance
- 605 Medical Interpretation
- 606 Services for Physical & Developmental Disabilities
- 607 Housing Assistance
- 608 Fuel Assistance
- 609 Food Assistance
- 610 Child Care Assistance
- 611 Respite Care
- 999 Other Community Need